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## APPLICANTS

William Walker Franklin, Richmond, VA;

Marion Roamadison Cabbie III, Richmond, VA;

Eric Gregory Cunningham, Richmond, VA; Christopher Alan Palmer, Mechanicsville, VA;

\*\* CONTINUING DATA \*\*\*\*\* *none*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/10/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 2	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

## ADDRESS

05073  
 BAKER BOTTS L.L.P.  
 2001 ROSS AVENUE  
 SUITE 600  
 DALLAS, TX  
 75201-2980

## TITLE

System and method for customized intelligent contact routing

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )